

The Immigration Enforcement Review Board 270 Washington Street, SW Room 1-156 Atlanta, GA 30334

## **Complaint Form**

(Submissions must be typed or printed legibly)

Date of Complaint:
Name of Public Agency or Employee Against Whom Complaint is Made:
Address of Public Agency Against Whom Complaint is Made or Which Employs The Individual Against Whom Complaint is Made:
City:, GA
Zip:
Telephone: ()
Eligibility Status Provision that the public agency or employee allegedly violated (Check All That Apply):  O.C.G.A. § 13-10-91 Requirements for government agencies concerning the federal work authorization program (E-Verify) in hiring new employees or in entering contracts for the physical performance of services
O.C.G.A. § 36-80-23 Prohibition against local governments adopting, enacting, implementing, or enforcing an immigration sanctuary policy
O.C.G.A. § 50-36-1 Requirements for government agencies in the administration of public benefits
Name of the City (if applicable) and County where violation allegedly occurred:
City: County:
Date or dates that public agency or employee allegedly violated the Eligibility Status Provision(s):

Specific and detailed description of how the public a Status Provision(s):	agency or employee violated the Eligibility
(Attach additional documentation as may be necessar	ary)
I swear or affirm that I am a lawful resident of the S voter, and that the facts in this complaint are true.	tate of Georgia, that I am a legally registered
Signature of Complainant:	
Name of Complainant (printed):	
Complainant's Address:	Telephone: ()
Sworn to and subscribed before me, this the	day of, 20
Notary Public My Commission Expires:	

Complaints must be mailed to: The Immigration Enforcement Review Board, 270 Washington Street, SW, Room 1-156, Atlanta, GA 30334.